

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	71530	01-13-00
O.I.P.E. CLASSIFIER			2-1-00
FORMALITY REVIEW	YC	72017	2-7-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4-25-01
2	✓	✓	4-25-01
3	✓	✓	4-25-01
4	✓	✓	4-25-01
5	✓	✓	4-25-01
6	✓	✓	4-25-01
7	✓	✓	4-25-01
8	✓	✓	4-25-01
9	✓	✓	4-25-01
10	✓	✓	4-25-01
11	✓	✓	4-25-01
12	✓	✓	4-25-01
13	✓	✓	4-25-01
14	✓	✓	4-25-01
15	✓	✓	4-25-01
16	✓	✓	4-25-01
17	✓	✓	4-25-01
18	✓	✓	4-25-01
19	✓	✓	4-25-01
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If more than 150 claims or 10 actions  
 staple additional sheet here

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